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Bib Data Sheet

CONFIRMATION NO. 3753

SERIAL NUMBER 09/878,806	FILING DATE 06/11/2001 RULE	CLASS 705	GROUP ART UNIT 2165	ATTORNEY DOCKET NO. J&J-2025
APPLICANTS David A. Boeke, Loveland, OH;				
** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/211,809 06/14/2000 <i>YES for 9/5/03</i>				
** FOREIGN APPLICATIONS ***** <i>None for 9/5/03</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/07/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		STATE OR COUNTRY OH	SHEETS DRAWING 11	TOTAL CLAIMS 1
INDEPENDENT CLAIMS 1				
ADDRESS 000027777				
TITLE Cooperative medical shopping system				
FILING FEE RECEIVED 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	